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FACSIMILE COVER SHEET

June 26, 2006

Receiver: Examiner Haliyur, Venkatesh N. / Art Unit 2616
USPTO

FAX # : 571-273-8300
(Central Fax)

Sender: Leslie Russell, Patent Secretary for:
Jeffrey K. Weaver, Registration No. 31,314

Serial No. 09/691,419

Our Ref. No.: CISC261/2005

Re: Response to OA

Pages Including Cover Sheet(s): 12

Fax Contents: Fax Cover Sheet- 1 page
Amendment Transmittal - 1 page
Amendment A - 10 pages

MESSAGE:

CONFIDENTIALITY NOTE

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JUN 26 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: MacKay et al.

Attorney Docket No.: CISC261/2005

Application No.: 09/691,419

Examiner: Haliyur, Venkatesh N.

Filed: October 17, 2000

Group: 2616

Title: METHOD AND APPARATUS TO DETECT
AND BREAK LOOP CONFIGURATION

CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being transmitted via facsimile to the U.S. Patent and Trademark Office, Attention Examiner Haliyur, Venkatesh N., at facsimile telephone number (571) 272-8300 on June 26, 2006.

Signed:

Leslie Russell

AMENDMENT TRANSMITTAL

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims After Amendment		Highest Previously Paid For	Present Extra	Small Entity Rate Fee	Large Entity Rate Fee
Total Claims	21	MINUS	21	0	x 25 =	x 50 = 0
Independent Claims	5	MINUS	5	0	x 100 =	x 200 = 0
Multiple Dependent Claim Present and Fee Not Previously Paid						
Total					\$	\$

- ☐ Applicant(s) hereby petition for a _____ month extension(s) of time to respond to the aforementioned Office Action.
- ☒ Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 500388.
- ☐ Enclosed is our Check No. _____ in the amount of \$ _____ to cover the additional claim fee and/or extension of time fees.
- ☒ Please charge the required fees, or any additional fees required to facilitate filing the enclosed response, to Deposit Account No. 500388 (Order No. CISC261).

Respectfully submitted,
BEYER WEAVER & THOMAS, LLP

Jeffrey R. Weaver
Reg. No. 31,314

P.O. Box 70250

Oakland, CA 94612-0250

JUN 26 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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U.S. Patent and Trademark Office, Attention Examiner Haliyur, Venkatesh N.,
at facsimile telephone number (571) 273-6300 on June 26, 2006.

Signed: _____

Leslie Russell

AMENDMENT A

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated May 17, 2006, please amend the above-identified
patent application as follows:

Amendments to the Claims are reflected in the listing of claims which begin on page 2 of this
paper.

Amendments to the Drawings begin on page 6 of this paper and include an attached replacement
sheet.

Remarks/Arguments begin on page 7 of this paper.